

AC 4471 (1) STOCKTON-ON-TEES



ANNUAL REPORT

OF THE

Medical Inspection, etc.,

OF THE

Elementary School Children

OF THE

BOROUGH OF STOCKTON-ON-TEES,

during the year 1932,

BY

G. C. M. M'GONIGLE, M.D., D.Hy., B.S., D.P.H., M.O.H.,

School Medical Officer ;

AND

E. B. G. EWEN, M.B., Ch.B.

Assistant School Medical Officer.

Stockton-on-Tees

PRINTED BY EDWARD APPLEBY, LTD., PRINCE REGENT STREET,

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Health Department,
11, Finkle Street,
Stockton-on-Tees,
April 19th, 1933.

To the Chairman and Members of the Education Committee.

Ladies and Gentlemen,

The work of the School Medical Department continued during 1932 upon the lines laid down in former years, but in the early Autumn it became evident that the results of extensive and prolonged unemployment of a very large section of the working population was being reflected in the state of nutrition of the children attending the elementary schools in the Borough. The Education Committee therefore, by resolution, decided to put into operation the provision of meals clauses of the Education Act. The wisdom of this decision has been fully confirmed by the results of special examinations of the nutritional condition of the children.

During the Autumn the routine work of the Department was considerably upset by the special examinations referred to in the preceeding paragraph. As a result of these special examinations a large, and increasing number of children have been provided with a daily ration of milk, or a mid-day meal. The arrangements made by the Director of Education for the cooking, distribution and serving of the mid-day dinners have proved to be excellent and reflect considerable credit upon his Department.

The subject of nutrition, its detection and assessment, is a matter of considerable difficulty ; and, as I have pointed out on previous occasions the problem to be faced is the prolonged effects of a diet deficient in certain constituents and not, as is popularly supposed, an acute shortage of actual quantity of food. The ill-effects of a prolonged shortage of such constituents of a diet as vitamins, proteins or minerals are observed, not solely in a loss of weight, but in a tendency to anaemia, lowered resistance to infections such as sepsis and bronchitis. The provision of a mid-day meal will go far to counteract the conditions mentioned above but it must be obvious that considerable time will be required before the general nutritional state of many of the children is satisfactorily restored and further that a cessation of feeding by the Committee would result in a gradual return to an unsatisfactory state if the economic circumstances of the parents had not improved.

The special investigation into the incidence and course of rheumatic conditions in children has been continued, but, owing to the amount of time which has had to be devoted by the staff to the question of nutrition, the time available for this study has had to be curtailed. The work on rheumatism has now been resumed and it is hoped that, by the end of the year, it will be possible to present a special report on the subject.

Your obedient servant,

G. C. M. M'GONIGLE,

School Medical Officer.

1. Details associated with Elementary Education in the Borough.

Number of Schools	22
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These include 19 Elementary Schools, one Central School, one Special School for Deaf Children and one Special Open-Air School for delicate Children.

Number of children for whom accommodation is provided	...	...	...	...	13,250
Average attendance for 1932	...	...	...	...	11,008'3
Percentage attendance for 1932	...	...	...	...	92'2

The Staff of the School Medical Service. The staff consists of the School Medical Officer, who is also the Medical Officer of Health ; one whole-time Assistant School Medical Officer ; one whole-time School Dentist ; four School Nurses, one of whom is on the staff of the Open-Air School, another on Dental Work, and a third was appointed during the year in place of a School Attendance Officer ; and two Clerks.

Dr. J. Sutherland, Assistant School Medical Officer, resigned her appointment at the end of July, 1932, and Dr. E. B. G. Ewen took up her duties on November 1st. A locum was engaged to carry on the work in the interim.

The School Dental Nurse, Miss A. Carr, resigned her post in November 1932, and Miss W. Ward, one of the School Nurses was transferred to the School Dental Department.

The following is the personnel of the Department—

School Medical Officer—G. C. M. M'Gonigle,
M.D., D.Hy., B.S., D.P.H.

Assistant School Medical Officer—E. B. G. Ewen, M.B., Ch.B.

School Dental Officer—Alfred E. Pattie, L.D.S.

School Nurses—Miss M. Lamb, Open-Air School.

Miss M. A. Fields.

Miss M. A. Alton, School Attendance Nurse.

Miss W. Ward, School Dental Nurse.

Clerks—Miss J. Hall.

Miss I. Parish

2. Co-Ordination.

Arrangements for the co-ordination of the work of the School Medical Service with that of other health services:—

(a) **Infant and Child Welfare.** The schedule cards are sent from the Welfare Centres to the School Clinic as the children reach school age. Cases of Squint are sent to the School Clinic for examination and “delicate children” are recommended for admission to the Open-Air School.

(b) There is **Co-ordination with the Health Department** in the notification of infectious diseases among school children.

(c) There are no Nursery Schools in the Borough.

3. School Hygiene and Sanitation.

Attention continues to be given to the hygienic conditions of the schools. No structural alterations have been done but, in certain schools, the lighting has been improved by a more satisfactory distribution of the lighting units. Further steps in this direction are contemplated.

Open fires still exist in three of the schools and these are to be substituted by low pressure hot water systems as soon as financial conditions allow. The remaining schools, with two exceptions,

which have the high pressure system, are heated by low pressure hot water systems. Temperature charts are kept so that defects are quickly recognised and remedied.

As opportunities occur the older school desks are being replaced by those of a modern type and suited to the varying heights of the children.

In view of a scheme of reconstruction of the existing schools upon 'Hadow' lines for which plans are ready, the progress in the work of reconditioning the sanitary conveniences, is temporary checked though with one or two exceptions they are comparatively modern.

There is a good supply of water for washing and drinking purposes. In two schools both hot and cold are available for washing. Great attention continues to be given to the cleanliness of the schoolrooms and cloakrooms, the work of the caretakers being reported upon each month.

In two schools the lower rails in the cloakroom, formed of tubes, are heated to allow of the drying of the children's clothes.

The Committee continue to impress upon the staff the importance of securing that the rooms are kept fresh by the fullest possible use of open windows. A welcome feature of the year under review has been the greater number of classes taken in the open air.

The Teaching of Hygiene in Schools. In the majority of schools, personal cleanliness is insisted upon by the teachers. Handkerchief drill and breathing exercises are carried out, attention is given to the cleanliness of school basins, playgrounds and lavatories. Health Posters, especially those published by the Health and Cleanliness Council, are freely used within the school buildings.

4. Medical Inspection.

Three age-groups of children are inspected as routine :—

- (1) The entrants, aged five years.
- (2) The intermediate group, aged eight years.
- (3) The leavers. aged twelve years.

The Board's schedule of Medical Inspection has been followed at routine inspection.

In every case where the child is receiving a routine inspection at the schools, parents are invited to be present. The percentage of attendance of parents is highest in the case of infants—59·6%. For the eight year old children the percentage of attendance of parents was 40·1%, an increase of 5·1% over the 1931 figures.

In the case of the 12 year old children there is a marked falling off in the attendance of parents, due chiefly to the fact that the older children do not wish their parents to attend.

If the parents are unable to attend and the child is found to be suffering from a defect, notice is sent to the parents advising them to obtain medical treatment. After an interval, the child is re-examined, to see if efficient treatment has been carried out. If necessary, the the parents are seen, a second notice is sent, or the School Nurse visits the home.

The School Clinic at Victoria Terrace is open on Monday and Friday afternoons and on Tuesday, Wednesday, Thursday and Saturday mornings.

The School Clinic at the Frederick Nattrass School is open on Wednesday afternoons.

The Assistant School Medical Officer is in attendance at Victoria Terrace on Monday and Friday afternoons and on Saturday morning and at the Frederick Nattrass Clinic on Wednesday afternoon. The School Nurse is in attendance at all other times.

Special cases or re-examinations are seen at the schools during routine examinations or special visits or at the School Clinic.

Children at the Open-Air School are inspected on admission and re-inspected at intervals during their stay.

Children at the Deaf School are inspected on admission and then once a year. When necessary they are re-inspected at special visits.

The School Nurse visits the schools without previous notice to examine all children for cleanliness.

5. Findings of Medical Inspection.

The children inspected in the three code-group ages numbered 3,323. In addition there were 72 other children who were inspected according to schedule; these were children attending the Deaf School, admissions to Ragworth Open-Air School, mentally defective children, etc.

The percentages of children of code-group ages found to have defects requiring treatment were as follows :—

Mill Lane School	...	...	26·19%
Bailey Street School	...	...	18·78%
Bowesfield Lane School	...	...	24·00%
Tilery Road School	...	...	20·67%
Oxbridge Lane School	...	...	23·84%
Hume Street Juniors' School	...	...	18·34%
Portrack Juniors' School	...	...	25·51%
Newtown School	...	...	16·56%
Richard Hind Juniors' School	..	..	7·8 %
Richard Hind Central School	...	...	10·96%
Norton School ...	...	...	12·63%
Frederick Nattrass School...	...	...	15·69%
Hartburn Juniors' School	...	...	18·75%
Holy Trinity Boys' School	...	...	13·23%
St. Thomas' School	...	...	25·64%
St. James' School	...	...	25·71%
St. Mary's School	...	...	26·08%
St. Cuthbert's School	...	...	19·08%
Carlile Memorial School	...	...	19·17%
Average percentage			<u>19·4 %</u>

9,709 children were inspected as "Specials." These are referred by Parents, Teachers, School Nurses, Attendance Officers etc.

Serious departures from health are found more frequently in special cases than at routine medical inspection.

Approximately 5,767 of the special cases in 1932 were examinations of the state of nutrition of children attending elementary schools.

(a) **Uncleanliness.** During 1932. 14,612 children were examined by the School Nurses. 691 children were found to be unclean, and of this number 94 were found to be actually verminous. Seven children came to the School Clinic for cleansing of verminous heads. The rest were cleansed at home under the supervision of the School Nurse.

No legal proceedings were taken.

In many instances, the same children are found to be verminous year after year and other children from the same families are usually affected.

(b) **Tonsils and Adenoids.** At code-group inspections there were 161 cases of markedly enlarged tonsils, 25 cases of adenoids, with persistent mouth breathing, and 63 cases of enlarged tonsils with adenoids.

Among the specials were 112 cases of enlarged tonsils, 11 cases of adenoids and 12 cases of enlarged tonsils and adenoids.

116 cases were treated by operation; 30 of these under the Authority's scheme. 63 were treated medically.

(c) **Tuberculosis.** 155 children of school age have attended the Tuberculosis Dispensary during the year, and the localisation of their diseases was as follows:—

Glandular	...	...	59
Pulmonary	...	...	35
Bones and Joints...	...	...	28
Abdomen	...	...	28
Skin (Lupus)	...	...	5
Total			<hr/> 155 <hr/>

Among children of code-group ages, one new case of suspected pulmonary tuberculosis was found. Any cases which are considered suitable for the Open-Air School are admitted.

(d) **Skin Disease.** At routine inspections, 3 cases of ringworm of scalp were found, and 6 of ringworm of body. As special cases, there were 41 of ringworm of scalp and 40 of ringworm of body.

These cases involve a considerable loss of school attendance, and, in spite of daily attendance at the School Clinic, this time cannot be shortened without the aid of X-Ray treatment.

Teachers and parents have been asked to report cases to the Clinic at the earliest appearance of the disease, and all the other members, of school age and younger, of an affected family, are inspected at the School Clinic. In spite of these precautions, many cases are seen for the first time when the disease is well advanced.

2 cases of scabies were found at routine inspection and 20 as specials. Impetigo continues to be prevalent. There were 56 cases found at routine inspections and 504 as specials.

(e) **External Eye Disease.** 11 cases of conjunctivitis were found at routine inspection and 106 as specials. A number of cases of conjunctivitis and keratitis received daily treatment at the Clinic.

(f) **Vision.** Among the routine examinations, 212 children were found to be suffering from defective vision, excluding squint, necessitating further examination, while 46 were noted to be kept under observation.

112 cases of squint were seen among the children examined at routine inspection and of these, 47 required treatment, while 65 had suitable spectacles and required to be kept under observation.

Among the specials there were 133 cases of defective vision requiring treatment and 89 cases of squint.

To get the maximum value of treatment, it is imperative that children suffering from defective vision and squint should be seen at the earliest possible age. This year, 14 cases were sent to the School Clinic by the Child Welfare Department for examination and suitable treatment was prescribed.

(g) **Ear Disease and Hearing.** 22 children from the Stockton area are attending certified schools for the deaf; 21 are at the special day school in Stockton and 1 at the Boston Spa R.C. Residential School.

16 children from neighbouring Authorities also attend the Deaf School.

At routine medical inspections in the elementary schools, 15 children were found with defective hearing, but still suitable for an ordinary elementary school. Among the specials, 24 had some deafness.

(h) **Dental Defects.** During the year, 5033 children were inspected, of which number, 4643 were routine cases and 390 were special cases. Of the 5033 inspected, 3,276 were found to require treatment and of this number 1660 actually received treatment.

(i) **Crippling Defects.** There are 76 school children suffering from crippling defects; 36 of these have heart trouble and 40 are cases of paralysis, deformity, etc.

Of the 76 children, 49 are attending ordinary elementary schools, 13 are at Ragworth Open-Air School, 1 is at a certified residential school for crippled children, and 13 are at no school.

Of those attending ordinary elementary schools, 22 have heart trouble and 27 are cases of paralysis; deformity, etc. The children attending Ragworth Open-Air School are all suffering from heart trouble, while of those attending no school, 4 are heart cases and the rest have other crippling defects.

6. Infectious Disease.

Notified cases of infectious disease are the subject of an inquiry by a Sanitary Inspector or by the Medical Officer of Health. All children in invaded households are excluded from school for a specified period and a notice is promptly sent to the Head Teacher of the school involved. If the child is removed to the Isolation Hospital, disinfection is carried out in the home without delay and

the infected bedding, etc., is removed for disinfection by steam. If the child is nursed at home, the whole household is kept under observation until a certificate of freedom from infection is received from the medical attendant and then disinfection is carried out. Children who have recovered in the Isolation Hospital are excluded from school after discharge from that institution for a stated period.

During the year 354 children were excluded from school on the ground that this was necessary to prevent the spread of infection. Of this number, 147 were actual sufferers from infectious disease of one kind or another, while 207 were contacts.

No school or department was closed during the year on account of infectious disease.

7. Following-up.

After defects have been discovered and the parents advised to secure treatment, it is most important to see this advice has been followed.

All cases of notified defects are therefore re-examined by the Assistant School Medical Officer at the time of routine inspections and special visits. Cases are also followed up by the School Nurses and by examinations at the School Clinic.

64 special visits, as distinct from visits for routine medical inspection, were paid to the schools to follow up defective children.

After operations, especially tonsils and adenoids, it is necessary to follow up the cases to see that the treatment has been successful.

Summary of Work undertaken by the School Nurses.

The Clinic Nurse undertakes routine examinations for cleanliness in the schools and follows up unsatisfactory cases until they are satisfactory.

She is in attendance at the School Clinic in Victoria Terrace, on Monday and Friday afternoons and on Tuesday, Wednesday, Thursday and Saturday mornings, when she undertakes the treatment of minor ailments.

Home visits are paid to advise parents about treatment, to arrange appointments for refractions and other special examinations, and to get absentees from school, who are not receiving medical attention, to report at the School Clinic.

During the year she paid 1,739 visits to homes.

The second School Nurse is in attendance at the Ragworth Open-Air School. She bathes, weighs and measures the children, treats minor ailments and visits the absentees at their homes.

On two afternoons a week, she attends at the Victoria Terrace Clinic, and one afternoon at the Frederick Nattrass Clinic.

During the year there have been 191 visits to homes, 3,882 dressings and 5,259 baths.

8. Medical Treatment.

(a) **Minor Ailments.** These are treated at the School Clinics. The Assistant School Medical Officer attends at the Clinic at Victoria Terrace, on Monday and Friday afternoons and at the Clinic at the Frederick Nattrass School on Wednesday afternoons.

The number of minor ailments treated at the School Clinics during 1932 was 3,397. (For further details see Table IV, Group 1).

(b) **Tonsils and Adenoids.** These cases receive operative treatment at the Stockton and Thornaby Hospital by Dr. Keswick, Hon. Surgeon for Diseases of the Ear, Nose and Throat. 179 children were recommended for operative treatment and in 116 cases operations were performed, 30 cases under the Education Committee's Scheme and 86 cases where Private Medical Attendants arranged for their operative treatment.

(c) **Tuberculosis.** Tuberculosis cases attend the Durham County Council Tuberculosis Dispensary in Stockton for advice and treatment.

155 children of school age have attended during the year and 18 children have been in a sanatorium.

Cases of surgical tuberculosis are treated at the Stockton and Thornaby Hospital. Lupus cases attend the Royal Victoria Infirmary, Newcastle, for ultra violet ray treatment.

(d) **Skin Diseases.** Skin diseases are treated at the School Clinics, 688 cases have been treated there, and 20 at Hospital or by Private Practitioners.

(e) **External Eye Disease.** 266 cases have been treated at the School Clinics and 6 at Hospital or Private Practitioners.

Children suffering from corneal ulceration and other eye diseases associated with poor general health are admitted to the Ragworth Open Open Air School.

(f) **Vision.** Examination of refraction in cases of defective vision, squint and eye-strain, and prescription of spectacles is undertaken at the School Clinic. Parents pay the cost of spectacles prescribed, or, in necessitous cases the Education Committee supplies them.

305 children have had their refraction examined during the year, at the School Clinic, while, in 11 additional cases, the refraction was not completed, through failure to keep appointments or for other reasons. 10 refractions were done at other places.

Among the 305 children examined at the School Clinic, 14 were under 5 years and were sent by the Maternity and Child Welfare Department.

Of these 305 cases, spectacles were recommended for 204 and 167 obtained them, that is, 81·8%.

In 97 cases, spectacles were not prescribed because they required other forms of treatment, or because the old lenses were still suitable.

Children are asked to report broken or lost spectacles to the Clinic and 57 were repaired during 1932. When spectacles are reported lost the refraction is examined and lenses are altered, if necessary, before new spectacles are obtained.

Some parents fail to appreciate the importance of correcting the defective vision of their children, in spite of careful examination and much follow-up work by the nurses.

(g) **Ear Disease and Hearing.** 132 cases of discharging ears have attended the School Clinic for treatment during the year.

(h) **Dental Defects.** Of the 5,033 children examined during the year, 3,276 were found to require treatment, and of this number 1,660 actually received treatment. The percentage of children accepting treatment was 50·6%.

The operations performed comprised 375 fillings of permanent teeth, 11 fillings of temporary teeth, 406 extractions of permanent teeth, 2,221 extractions of temporary teeth, and 227 dressings of silver nitrate. In brief 386 fillings, 2,627 extractions and 227 dressings and sundries were completed, a total of 3,261 operations during the year. Nitrous Oxide Gas was administered on 124 occasions by the Assistant School Medical Officer.

(For further details see Table IV (Group IV)).

The following is a report by the School Dentist on the work of the department during the year 1932.

“In the course of routine inspection during the year, 4,643 children were examined and of these, 62·1% were found to require treatment. This is an improvement of 2·4% upon the figure for 1931 which showed 64·5%. The improvement may not be large, but it grows as the dental scheme becomes more fully operative and matured.”

“Extractions of temporary teeth show a slight decrease which is a satisfactory feature. By way of contrast it is not so pleasant to record an increase in the extraction of permanent teeth, although

this is due to the inclusion of an older age group. Until the scheme is fully developed, i.e., every child inspected annually, a number of children come into the scheme each year for the first time. The greater majority of these show much decay in the permanent teeth, rendering extraction the only means of restoring the mouth to a clean and sound condition."

"Many more permanent teeth have been saved this year by filling methods."

"During the year I have carried out a careful examination of the five year old children just after having been admitted to school. 6·4% of these showed perfectly *sound and complete* deciduous dentitions. This is 0·8% less than last year."

"I share the Medical Officer's interest in this particular record and it would be very interesting and informative if statistics of these five year old entrants were available throughout the country."

"The percentage is extremely low and shows the appalling onset of caries among all children during the early years. It, no doubt, corresponds to the general industrial conditions of the Borough and bears a relationship to unemployment and consequent difficulty in obtaining the necessities of life. It also bears upon the quality of the food (as distinguished from the quantity) obtainable, by the rapidity with which teeth, once decayed, become unsaveable."

"The importance of the influence of the temporary teeth upon the general health and state of the child, and upon the permanent teeth, cannot be overestimated."

A. E. PATTIE. L.D.S.,

School Dental Officer,

(i) **Crippling Defects and Orthopaedics.** The Stockton and Thornaby Guild for the Care of Crippled Children holds meetings at the Victoria Terrace School Clinic. 32 children of school age and living in the Borough attended during the year. Surgical treatment has

been obtained at the Stockton and Thornaby Hospital under Dr. Irving, the Honorary Orthopaedic Surgeon, and boots and appliances have been supplied by the Cripples' Guild.

Suitable cases of rickets, tuberculosis, osteomyelitis, etc., are admitted to Ragworth Open Air School. One boy is at St. Vincent's Residential Cripple School, at Pinner.

(j) **Speech Training.** In January, 1932, there were 54 children attending the special classes and 44 were admitted during the year.

During the 12 months under review, two children reached the age of 14 and left school, five left the town and 14 were discharged cured. This resulted in a total of 77 children in attendance at the end of December, 1932.

Of those discharged, the length of treatment varied from six to thirty months, the average being seventeen months. Three of the boys were originally very bad cases and these all attended for $2\frac{1}{2}$ years. One or two of the older ones have since left school, but the rest have been re-examined on several occasions and there is no relapse so far.

It is still apparent that the best results are obtained with those children who have help and sympathy at home and at school. At the same time it should be pointed out that those wishing to give help should first of all be familiar with the treatment given in the classes. Lack of progress in one or two cases has been traced to the fact that well-meaning though detrimental advice has been given.

Cod Liver Oil Emulsion. The value of cod liver oil is now well recognised, especially in an industrial area with a large percentage of unemployed.

It is sold at the School Clinic at threepence for four ounces, and is prescribed in all cases of anæmia, subnormal nutrition, rickets, bronchitis, rheumatism, chorea, and convalescence after illnesses.

During 1932, 21 gallons were obtained by parents with good results.

9. Open-Air Education.

(a) **Playground Classes.** These are held in some of the Infants' Schools during the summer.

(b) **School Journeys.** During the year 1932, two period excursions and several day trips were organised at the Richard Hind Girls' Central School.

On Friday, May 6th, thirty girls and three Mistresses visited Keswick where they stayed for a week in the Holiday Fellowship Guest House at Newlands. The time was very profitably spent in exploring the surrounding country.

The cost (30/-) per head was borne by the parents but the Stockton Branch of the Women's Citizens' Association very kindly paid for one child and other help was received from friends who were interested.

Form IVa spent a week-end at Bardon Mill in order to explore the section of the Roman Wall by Housesteads and Grag Logh. On the way they visited Hexham Abbey, and spent a day in Durham on the return journey.

A notable day excursion was to Barras. The outward journey was broken by a short time in Barnard Castle and there was sufficient time for a good moorland walk in the direction of Tan Hill.

Several half day walks were taken with the object of studying botany and the School Certificate girls visited many churches of interest in order to study their Architecture.

(c) **School Camps.** There were no school camps during the year.

(d) **Open-Air Classrooms in Public Elementary Schools.** There are no open-air classrooms in the public elementary schools, but the Frederick Nattrass School is built on open-air school lines.

(e) **Day Open-Air School.** The Ragworth Open-Air School has now been open for six years and the waiting list continues to be greatly in excess of the numbers which it is possible to admit. Even in mid-winter the attendance is excellent and much higher than some of the elementary schools, viz., 92·5%.

Very few cases of infectious disease occurred during the year,

There is accommodation for 140 children. At the end of the year there were on the register 73 boys and 67 girls. The types of cases admitted are: anaemia, malnutrition, rheumatism, pre-tubercular cases and cases of non-infective tuberculosis (lungs, glands, skin, bones, abdomen, etc.,) corneal ulceration, rickets, convalescents. etc., Those in attendance at the end of the year were as follows:—

Tuberculosis cases	...	33
Malnutrition	... ..	8
Rickets, marked	... ..	9
Anaemia	... ..	15
Corneal Ulceration	...	3
Rheumatic manifestations	...	26
Convalescents	... ..	46
Total		<hr/> 140 <hr/>

10. Physical Training.

Five playfields continue to be used for Organised Games for school children during school hours according to time table and the scholars are given instructions in the physical exercises included in the syllabus of Physical Training issued by the Board of Education.

The Schools Athletic Association has been actively engaged in arranging inter-school matches in which keen interest is shewn both by scholars and teachers.

11. Provision of Meals.

The subject of the provision of meals for school children, who are certified by the School Medical Officer to be undernourished, is under consideration by the Authority and it is expected that arrangements will be made for supplying a mid-day meal in necessitous cases.

At the Open-Air School the number of children in attendance during the year 1932 has been up to the limited accommodation (140) and three good meals per day have been provided for each child in attendance, contributions to the cost thereof being borne by the parents in accordance with a scale fixed by the Committee.

12. School Baths.

There are no school baths except at the Ragworth Open-Air School.

13. Co-operation of Parents.

At medical inspections, invitations are sent to parents to attend at the schools when the children are examined. 3,094 parents have paid at least one visit to school or clinic with their children during the year.

14. Co-operation of Teachers.

We are indebted to the teachers for much help in connection with routine inspections at school, reports on mentally retarded children, supervision of children wearing spectacles and reports on cases of suspected vision defect.

In addition, they assist greatly with the regular attendance of children at the clinic for the treatment of minor ailments.

15. Co-operation of School Enquiry Officers.

Information is constantly being sent to the School Clinic by the Enquiry Officers, of children remaining out of school, often without medical attention of any kind. Certificates issued from the School Clinic assist them in distinguishing between cases of genuine illness and those whose illness has been brought forward as an excuse for non-attendance,

Lists of long absentees from school are sent to the clinic so that they can be visited by the School Nurse.

Absentee children from Ragworth Open-Air School are visited by their own School Nurse.

16. Co-operation of Voluntary Bodies.

(1) The Mayor's Unemployment Relief Fund (Children's Boot Fund).

Boots have been distributed during the winter 1931-32 to 381 poor children at a cost of £142. This increased number has been made possible by the generosity of public subscribers who have given to the fund double the amount of donations in 1930-31. Though the donations have been greatly appreciated, the total amount subscribed did not enable the Committee to provide boots for all the children in need of foot-wear.

The Children's Boots Committee have however received an intimation that the late Robert Jobson, of Trinity Street, Stockton-on-Tees, has left a legacy of £250 for the provision of children's boots, and in addition a one sixth share in his Residuary Estate for this purpose, estimated to produce £1,850. These substantial sums will provide a sufficient amount to meet the whole of the most needy cases during the present financial strain caused by acute industrial depression.

(2) **Children's Fresh Air Fund.** The Annual Outing provided for 500 poor children by the organisers of the Children's Fresh-Air Fund was carried out on the 2nd July, 1932. The children travelled by train to Seaton Carew and spent a very happy day by the sea-side.

The services of the School Teachers who took charge of the children and assisted in the distribution of food were highly appreciated by the Organising Committee.

(3) **Stockton & Thornaby Guild for the Care of Crippled Children.** This Guild provides surgical boots and appliances to school children who are in need of them. Close co-operation exists between the School Medical Service and this voluntary organisation-

17. Blind, Deaf, Defective and Epileptic Children.

Cases are seen during routine and special visits to schools and are also reported by the Maternity and Child Welfare Department, School Nurses, Parents, Teachers and Attendance Officers.

There is one totally blind child in the borough.

Eleven partially blind children are attending elementary schools.

Twenty-one children attend the Stockton Day School for the deaf and one boy is at the Boston Spa R.C. Residential School.

Fifteen partially deaf children are attending elementary schools.

During 1932, twenty-six children were given full mental and physical examination on account of educational backwardness and were classified as follows:—

			Boys	Girls
Idiots	...	...	—	—
Imbeciles	...	...	2	1
Feeble-minded (educable)			4	6
Dull and Backward	...		9	4

Six children have been notified as imbeciles to the Mental Deficiency Committee of the Durham County Council. Of this number, one, a boy, is totally blind.

There is no school for mentally defective children in the borough.

Of the above children, 22 are attending elementary schools and 4 are not attending any school.

The names of those children leaving elementary schools at the age of fourteen are forwarded to the Mental Deficiency Committee of the Durham County Council. Ten names were forwarded during 1932.

18. Special Schools.

The Day School for the Deaf, Nelson Terrace.

Copy of Report from Miss Malim, Head Teacher,
School for the Deaf.

There are at present, on the register, 37 children, of these, 20 are girls and 17 boys. 12 girls and nine boys are local children, the other eight girls and eight boys come from outside districts.

The average percentage of attendance during the nine working months of the present school year has been 94'6%, and the health of the children has been good.

The mentality of our children is good, and their speech and speech-reading seem to be developing well, except in the case of three, who made a very late start in oral education and who, perhaps, do not receive much interest from their people at home.

We cannot emphasise too much the value to a deaf child of an early start in education. To be successful a child must be made to realise speech and speech-reading as its normal means of communication, *not* as an accomplishment, and this is only possible when the child begins young and has not acquired a system of signs of its own.

Day Open-Air School for Delicate Children at Ragworth.

This school has accommodation for 140 children and at the end of the year there were on the register 140 children—73 boys and 67 girls. 206 children were admitted during the year and 197 left.

Those returning to elementary schools are kept under observation and if their improvement is not maintained they are re-admitted to the Open-Air School.

19. Nursery Schools.

There are no Nursery Schools in the borough.

20. Secondary and Continuation Schools.

These schools come under the School Medical Service of the Durham County Council.

21. Employment of Children and Young Persons.

Street Trading and Child Employment. During the year 17 boys have been registered for employment outside school hours as compared with 47 in the preceding year. The children so employed have been medically examined, and the employment card issued on receipt of the medical certificate of fitness for such employment.

The class of work in which the above-mentioned boys have been engaged was as follows:—

Newspaper delivery	...	...	10
Errand boys	...	...	6
Milk delivery	...	...	1
			—
			17
			—

The hours of employment for school children are generally one hour before morning school and one hour after school hours, not later than 6-30 p.m.

It is pleasing to note that during the year no case was reported where this type of employment had been found detrimental to the health of any child so employed.

During the year there was a reduction in the number of boys holding Street Trading Licences under the Bye-Laws, the total being 13, as compared with 21 in the previous year.

This class of work would appear to have a strong appeal to boys under the age 14 years, and the ease with which it can be secured is doubtless responsible for those who from time to time engage in this work contrary to the Bye-Laws. Such boys have been warned, and it has not been found necessary to take further proceedings.

Employment of Children in Theatrical Entertainments. One licence has been granted to a Stockton juvenile for permission to perform as a dancer out of the district.

The mother and child appeared before the Committee prior to the granting of the licence. The conditions of the licence have been complied with, and satisfactory reports received on the child's progress.

Choice of Employment. The continued local depression has resulted in a still higher rate of unemployment amongst juveniles, there being few who can hope to obtain immediate employment on leaving school.

It is pleasing to report that increasing numbers of parents and children visit the Bureau for advice and registration, and that despite depression 291 boys and 318 girls, a total of 609, have been placed in employment during the period under review.

The appearance of the majority of the juveniles is such as to indicate that although many are the children of unemployed workers, nevertheless a fairly high standard of physical fitness would appear to be maintained.

Juvenile Unemployment Insurance. There has been no amendment to the Economy Order of October, 1931, so that the rates of Unemployment Insurance Benefit paid are unchanged namely :—

	Boys.	Girls.
Age 16 years	5/6	4/6
„ 17 „	8/-	6/9

Junior Instruction Centre for Stockton Boys. Prior to February 1932, Stockton boys whilst unemployed attended the Middlesbrough Junior Instruction Centre.

On February 1st, 1932, a Centre was opened in St. John's Schools, Stockton, for boys of 14—18 years. Claimants for Unemployment Insurance Benefit attend as a condition of receipt of benefit, while non-claimants in large numbers have availed themselves of the instruction provided.

The curriculum comprises instruction in school subjects, wood and metalwork and practical science. Particular attention is devoted to the physical side by organised games—football and cricket—and drill and badminton indoors.

The enthusiasm and prowess shown by the boys on the occasion of the first Junior Instruction Centre Sports Day, held in July last, was a tribute to the Centre's activities, denoting as it did a high standard of physical fitness which it is the aim of the Centre to maintain during periods of unemployment.

Homecraft Training for Girls. Appreciation of the benefits gained through a course of Homecraft Training has been evident from the increased number of girls who have applied for training.

Out of a total of 91 applicants interviewed by the Selection Committee 17 were finally accepted, and after their 13 weeks training in cookery, laundry, housewifery and needlework were placed in good resident posts.

Employment was found for a number of trainees in institutions and private houses in London, whilst others were placed in Keighley, Ilkley, Bradford and Worcester.

Co-ordination of the work of the School Medical Service with that of the Juvenile Employment Committee. Report cards are filled in by the Head Teachers for the children shortly before they leave school on reaching the age of 14 or over, giving details as to educational attainments. The health part of the report is filled in by the Assistant School Medical Officer, following a survey of the child's medical history throughout school life. These cards are sent to the Employment Officer at the bureau. 730 cards have been filled in during the year.

The Physical Conditions of Employed Children and Young Persons. The condition of employed children is, on the whole, satisfactory. 12 children have been examined and found fit during the year.

The street traders are older boys who have left school and have not found better employment. 6 boys have been examined and found fit during the year.

22. Special Enquiries.

Rheumatism in Children. 1932.

Notes.

Number of examinations during the year	362
Number of children now under observation	152 (Boys 76, Girls 76)
Number of new cases during the year	49 (Boys 29, Girls 20)
Distribution of the disease amongst the new cases was as follows—	
After Acute Rheumatism—	12 (Boys 10, Girls 2)
Sub-Acute Rheumatism—	22 (Boys 10, Girls 12)
Chorea—	15 (Boys 9, Girls 6)
Number of new cases with heart affected— (all after acute rheumatism)	5 (Boys 3, Girls 2)

Of the 152 children now under observation, the distribution of the disease is as follows :—

	Boys	Girls
After acute rheumatism—	43	26
Sub-acute rheumatism—	20	26
Chorea—	13	24
	—	—
	76	76
	—	—
Of these, heart affected after Rheumatism—	22	12
do. Chorea—	1	—
	—	—
	23	12
	—	—

One old case, a boy, developed heart trouble during the year (after chorea). Two of the old cases died during the year, a boy and a girl, both with heart trouble after acute rheumatism.

MEDICAL INSPECTION RETURNS.

TABLE I.—Return of Medical Inspections.

A.—ROUTINE MEDICAL INSPECTIONS.—Number of
Code Group Inspections.

Entrants	...	...	1166
Second Age Group	...	...	1135
Third Age Group	...	...	1022
			—
Total	...		3323
			—

Number of other Routine Inspections 72

B.—OTHER INSPECTIONS:

Number of Special Inspections...	9709
Number of Re-Inspections	... 10942
	<hr/>
Total	... 20651

TABLE II.—Stockton-on-Tees.

A. Return of Defects found by Medical Inspection in the year ended
31st December, 1932.

DEFECT OR DISEASE (1)	Routine Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring Treatment (2)	Requiring to be kept under observation but <i>not</i> requiring Treatment (3)	Requiring Treatment (4)	Requiring to be kept under observation but <i>not</i> requiring Treatment (5)
Malnutrition	11	0	10	0
Skin :				
Ringworm—Scalp	3	0	41	0
„ Body	6	0	40	0
Scabies	2	0	20	0
Impetigo	56	0	504	0
Other Diseases (Non-Tuberculous)	12	10	95	0
Eye :				
Blepharitis	44	0	130	0
Conjunctivitis	11	0	106	0
Keratitis	3	0	15	0
Corneal Opacities	7	0	9	0
Defective Vision (excluding Squint)	211	46	133	0
Squint	47	65	89	0
Other Conditions	0	6	3	0
Ear :				
Defective Hearing	15	0	20	4
Otitis Media	45	0	119	0
Other Ear Diseases	3	0	2	0
Nose and Throat :				
Enlarged Tonsils only	161	0	112	0
Adenoids only	25	0	11	0
Enlarged Tonsils and Adenoids...	63	0	12	0
Other Conditions	4	69	0	0
Enlarged Cervical Glands (Non-Tuberculous)	3	0	86	0
Defective Speech	60	0	48	0
Heart and Circulation :				
Heart Disease—Organic	0	28	27	0
„ Functional	0	34	0	0
Anæmia	44	0	20	0
Lungs :				
Bronchitis	3	0	29	0
Other Non-Tuberculous Diseases	3	0	50	0

TABLE II—continued.

DEFECT OR DISEASE (1)	Routine Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring Treatment (2)	Requiring to be kept under observation but not requiring Treatment (3)	Requiring Treatment (4)	Requiring to be kept under observation but not requiring Treatment (5)
Tuberculosis:				
Pulmonary—Definite ...	0	0	10	0
„ Suspected ...	1	0	10	0
Non-Pulmonary—Glands ...	1	0	16	0
„ Spine ...	0	0	3	0
„ Hip ...	1	0	1	0
„ Other Bones and Joints ...	2	0	5	0
„ Skin ...	1	0	2	0
„ Other Forms ...	0	0	10	0
Nervous System:				
Epilepsy ...	4	0	15	0
Chorea ...	3	0	33	0
Other Conditions ...	1	3	3	0
Deformities:				
Rickets ...	28	0	11	0
Spinal Curvature ...	4	0	0	4
Other Forms ...	5	27	0	7
Other Defects and Diseases ... (excluding Uncleanliness and Dental Diseases)	27	63	1603	688

B. NUMBER OF *Individual Children* FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT (excluding Uncleanliness and Dental Diseases).

GROUP (1)	Number of Children		Percentage of Children found to require Treatment (4)
	Inspected (2)	Found to require Treatment (3)	
CODE GROUPS:—			
Entrants ...	1166	207	17·7
Second Age Group ...	1135	249	21·9
Third Age Group ...	1022	202	19·7
Total (Code Groups) ...	3323	658	19·7
Other Routine Inspections ...	72	32	44·4%

TABLE III.—Stockton-on-Tees.

Return of all Exceptional Children in the Area.

			Boys	Girls	Total
Blind (including partially blind)	(i) Suitable for training in a School for the totally blind	At Certified Schools for the Blind ...	0	0	0
		At Public Elementary Schools ...	0	0	0
		At other Institutions ...	0	0	0
		At no School or Institution ...	1	0	1
	(ii) Suitable for training in a School for the partially blind.	At Certified Schools for the Blind or Partially Blind ...	0	0	0
		At Public Elementary Schools ...	8	3	11
		At other Institutions ...	0	0	0
		At no School or Institution ...	0	0	0
Deaf (including deaf and dumb and partially deaf)	(i) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf ...	9	12	21
		At Public Elementary Schools ...	0	0	0
		At other Institutions ...	0	1	1
		At no School or Institution ...	0	0	0
	(ii) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf ...	0	0	0
		At Public Elementary Schools ...	7	8	15
		At other Institutions ...	0	0	0
		At no School or Institution ...	0	0	0
Mentally Defective	Feebleminded	At Certified Schools for Mentally Defective Children ...	2	0	2
		At Public Elementary Schools ...	23	14	37
		At other Institutions ...	1	0	1
		At no School or Institution ...	3	0	3
	Notified to the Local Mental Deficiency Authority during the year	Details should be given on Form 307M.	—	—	—
Epileptics	Suffering from severe Epilepsy.	At Certified Schools for Epileptics ..	1	0	1
		At Certified Residential Open Air Schools ...	0	0	0
		At Certified Day Open Air Schools ...	1	0	1
		At Public Elementary Schools ...	0	1	1
		At other Institutions ...	0	0	0
		At no School or Institution ...	1	2	3
	Suffering from Epilepsy which is not severe.	At Public Elementary Schools ...	11	8	19
		At no School or Institution ...	0	2	2

TABLE III.—Continued.

			Boys	Girls	Total
Physically Defective	Active pulmonary tuberculosis (including pleura and intrathoracic glands)	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	1	2	3
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ..	0	0	0
		At Public Elementary Schools ...	0	0	0
		At other Institutions	0	0	0
		At no School or Institution	4	2	6
	Quiescent or arrested pulmonary tuberculosis (including pleura and intrathoracic glands)	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	0	0	0
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ...	5	3	8
		At Public Elementary Schools ...	10	8	18
		At other Institutions	0	0	0
		At no School or Institution	0	0	0
	Tuberculosis of the peripheral glands	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	0	0	0
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ...	5	4	9
		At Public Elementary Schools ...	28	21	49
		At other Institutions	0	0	0
		At no School or Institution	1	0	1
	Abdominal tuberculosis	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	0	3	3
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ...	2	1	3
		At Public Elementary Schools ...	14	3	17
		At other Institutions	1	1	2
		At no School or Institution	1	2	3
	Tuberculosis of bones and joints (not including deformities due to old tuberculosis)	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	4	5	9
		At Public Elementary Schools ...	8	7	15
		At other Institutions	0	0	0
		At no School or Institution	1	3	4

TABLE III.—continued.

			Boys	Girls	Total
Physically Defective continued	Tuberculosis of other organs (skin, etc.)	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	0	0	0
		At Public Elementary Schools ...	1	3	4
		At other institutions	0	0	0
		At no School or Institution	0	1	1
	Delicate children, <i>i.e.</i> all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School	At Certified Residential Cripple Schools	0	0	0
		At Certified Day Cripple Schools ...	0	0	0
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ...	50	63	113
		At Public Elementary Schools ...	90	103	193
		At other Institutions	0	0	0
		At no School or Institution	3	8	11
	Crippled children (<i>other than those with active tuberculous disease</i>) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life	At Certified Hospital Schools ...	0	0	0
		At Certified Residential Cripple Schools	1	0	1
		At Certified Day Cripple Schools ...	0	0	0
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ..	0	0	0
		At Public Elementary Schools ...	15	12	27
			(4)	(2)	(6)
	Children with heart disease, <i>i.e.</i> , children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school	At other Institutions	0	0	0
		At no School or Institution	5	4	9
		At Certified Hospital Schools ...	0	0	0
		At Certified Residential Cripple Schools	0	0	0
		At Certified Day Cripple Schools ...	0	0	0
		At Certified Residential Open Air Schools	0	0	0
		At Certified Day Open Air Schools ...	10	3	13
		At Public Elementary Schools ...	10	12	22
		At other Institutions	0	0	0
		At no School or Institution	2	1	3

Notes on Table 3.

Children suffering from multiple defects.

One boy, Mental Defective and Epileptic—attends elementary school irregularly.

One boy, Mental Defective and has Heart Disease—at no school or institution.

One boy, Mental Defective and has Pulmonary Tuberculosis—at no school or institution.

One boy, Epileptic and is Mentally Defective—attends elementary school.

One boy, Totally Blind, is Mentally Defective—at no school or institution.

Two boys, Cripples and Mental Defectives—at no school or institution.

One girl, Totally Deaf and Partially Blind—attending the school for the Deaf, Stockton.

Two girls, Epileptics and Mental Defectives—at no school or institution.

One girl, Epileptic and Mental Defective—attends elementary school irregularly.

One girl, Heart Disease, is Mental Defective—at no school or institution.

One Girl, Totally Deaf, is Mentally Defective—in Mental Institution (Sedgefield).

Two girls, Cripples and Mental Defectives—at no school or institution.

TABLE IV.—Stockton-on-Tees.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED
31ST DECEMBER, 1932.

TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which
see Group V.)

Disease or Defect (1)	Number of Defects treated or under treatment during the year		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
Skin :			
Ringworm—Scalp	42	2	44
Ringworm—Body	39	0	39
Scabies	17	5	22
Impetigo	505	4	509
Other Skin Disease	85	9	94
Minor Eye Defects (External and other, but exclu- ding cases falling in Group II)	266	6	272
Minor Ear Defects	153	1	154
Miscellaneous (e.g., minor injuries, bruises, sores, chilblains, etc)	938	4	942
Total	2045	31	2076

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding Minor
Eye Defects treated as Minor Ailments—Group I).

Defect or Disease (1)	Number of Defects dealt with			
	Under the Author- ity's Scheme (2)	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme (3)	Otherwise (4)	Total (5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	305	4	6	315
Other Defect or Disease of the Eyes (excluding those recorded in Group I)	0	0	0	0
Total	305	4	6	315

TABLE IV.—Continued.

Total Number of Children for whom Spectacles were prescribed :—

(a)	Under the Authority's Scheme	...	...	204
(b)	Otherwise	...	...	6

Total Number of Children who obtained or received Spectacles :—

(a)	Under the Authority's Scheme	...	...	167
(b)	Otherwise	...	...	6

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.

Received Operative Treatment.			Received other forms of Treatment.	Total number treated.
Under the Authority's Scheme in Clinic or Hospital	By Private Practitioner or Hospital apart from the Authority's Scheme.	Total.		
(1)	(2)	(3)	(4)	(5)
30	86	116	63	179

GROUP IV.—DENTAL DEFECTS.

(1) Number of Children who were :—
(a) Inspected by the Dentist :

		Aged :			
		5..... 1043			
		6..... 1211			
		7..... 1298			
		8..... 997			
		9..... 19			
Routine Age Groups	...	10..... 22		Total	4644
		11..... 15			
		12..... 21			
		13... .. 8			
		14..... 7			
		15..... 3			
Specials	...	...	...	...	390
Grand Total					5034

TABLE IV.—continued.

(b)	Found to require treatment	...	...	...	3276	
(c)	Actually treated	...	...	...	1660	
(d)	Re-treated during the year as the result of periodical examination	...	...	...	322	
(2)	Half-days devoted to:—					
	Inspection	...	...	...	98	} Total 418
	Treatment	...	...	...	320	
(3)	Attendances made by children for treatment	...	...	...	1947	
(4)	Fillings:—					
	Permanent teeth	...	...	...	375	} Total 386
	Temporary teeth	...	...	...	11	
(5)	Extractions:—					
	Permanent teeth	...	...	...	392	} Total 2606
	Temporary teeth	...	...	...	2214	
(6)	Administrations of general anæsthetics for extractions				124	
(7)	Other Operations:—					
	Permanent teeth	...	...	...	17	} Total 227
	Temporary teeth	...	...	...	210	
GROUP V.—UNCLEANLINESS & VERMINOUS CONDITIONS.						
(i)	Average number of visits per school made during the year by the School Nurses				...	10
(ii)	Total number of examinations of children in the schools by School Nurses				...	14,612
(iii)	Number of individual children found unclean				...	691
(iv)	Number of children cleansed under arrangements made by the Local Education Authority				...	7
(v)	Number of cases in which legal proceedings were taken:—					
	(a)	Under the Education Act, 1921			...	None
	(b)	Under School Attendance Byelaws			...	None

Statement of the number of Children notified during the Year ended 31st December, 1932, by the Local Education Authority to the Local Mental Deficiency Authority.

Total number of Children Notified ... 6

ANALYSIS OF THE ABOVE TOTAL.

DIAGNOSIS.	Boys.	Girls.
1. (i) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots	0	0
(b) Imbeciles	3	2
(c) Others	0	0
(ii) Children unable to be instructed in a Special School without detriment to the interests of other children :		
(a) Moral defectives	0	0
(b) Others	0	0
2. Feeble-minded children notified on leaving a Special School on or before attaining the age of 16 ..	0	0
3. Feeble-minded children notified under Article 3, <i>i.e.</i> , "special circumstances" cases	0	0
4. Children who in addition to being mentally defective were blind or deaf	1	0
Grand Total ...	4	2

